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TRANSMITTAL FORM

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Total Number of Pages in This Submission

16

Application Number

10/670,345

Filing Date

September 26, 2003

First Named Inventor

Bong-joo KIM

Art Unit

2653

Examiner Name

J. Watko

Attorney Docket Number

45270

ENCLOSURES (Check all that apply)

<input type="checkbox"/> Fee Transmittal Form	<input type="checkbox"/> Drawing(s)	<input type="checkbox"/> After Allowance communication to Technology Center (TC)
<input type="checkbox"/> Fee Attached	<input type="checkbox"/> Licensing-related Papers	<input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences
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<input type="checkbox"/> After Final	<input type="checkbox"/> Petition to Convert to a Provisional Application	<input type="checkbox"/> Proprietary Information
<input type="checkbox"/> Affidavits/declaration(s)	<input type="checkbox"/> Power of Attorney, Revocation	<input type="checkbox"/> Status Letter
<input type="checkbox"/> Extension of Time Request	<input type="checkbox"/> Change of Correspondence Address	<input checked="" type="checkbox"/> Other Enclosure(s) (please identify below):
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<input type="checkbox"/> Response to Missing Parts/ Incomplete Application	<input type="checkbox"/> Remarks	
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SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm or Individual name	Marcus R. Mickney Reg. No. 44,941
Signature	
Date	July 20, 2006

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IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Application No.: 10/670,345 Confirmation No.: 5241

Applicant: Bong-joo KIM et al.

Filed: September 26, 2003

TC/A.U.: 2653

Examiner: J. Watko

Docket No.: 45270

Customer No.: 01609

For: LOCKING DEVICE FOR TAPE CASSETTE
HOUSING OF TAPE RECORDER

AMENDMENT

Mail Stop Non-Fee Amendment
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Sir:

In response to the April 28, 2006 non-final Office communication, please consider the following:

Amendments to the Specification begin on page 2 of this paper.

The Claims are reflected in the listing of claims that begins on page 3 of this paper.

Remarks/Arguments begin on page 8 of this paper.